

## **Long Beach HIV Planning Group Meeting Minutes for 01.08.2014**

Presentation: Dr. Sonali Kulkarni, HIV Medical Director, and Sophia Rumanes, Chief of Prevention Services at the LA County Division of HIV and STD Programs presented updated HIV data for the Long Beach and SPA 8 area and described innovative approaches to HIV and STD testing being implemented in LA County. The slide set for this presentation is attached.

Presentation: Julio Rodriguez and Marc McMillin presented footage on the World AIDS Day December 01, 2013 celebration at the Center in Long Beach. This activity represents a truly collaborative effort among the many agencies, offices and clinics represented in the Long Beach HIV Planning Group. Day forum culminated in a night vigil attended by many.

Commission on HIV update: Marc McMillin discussed major points on the role that treatment plays in HIV prevention. He encouraged attendance and participation in the HIV Commission meetings every 2<sup>nd</sup> Thursday of each month at St Anne's Maternity Home Foundation (Conference Room) in Los Angeles.

Business meeting: There was interest in the group to look into and revisit the state of HIV and STD testing in the City of Long Beach. Subcommittee meetings will be planned.

Announcements (see below): If you want any of your programs, resources or services added to the list on the website, please provide the information below.

Name of resource or service

Cost:

Contact:

Brief description of resource or service:

Date posted

Anticipated take down (if known):

**If you want the full listing of free HIV resources and services in Long Beach from the LB Planning Group website, there are 2 ways to get there:**

1) Click on this link. [You can share this link with patients and staff](http://www.longbeach.gov/health/lbhivpg/a_to_z_services_listing.asp)

[http://www.longbeach.gov/health/lbhivpg/a\\_to\\_z\\_services\\_listing.asp](http://www.longbeach.gov/health/lbhivpg/a_to_z_services_listing.asp)

2) Search the long way

Google search: Long Beach Health Department

Once on the home page, click on Long Beach HIV Planning Group on the menu on the left side. Hover the mouse over it.

Click on A to Z Services Listing to find services and resources related to HIV in Long Beach and surrounding cities. Most, if not all, of the services are free.

**C**

**Conference – U.S. Conference on AIDS from 10/02/14 to 10/05/14, San Diego CA**

Cost: There is a subcommittee formed to sponsor scholarships for eligible participants to attend the conference. The LA subcommittee is suggesting the submission of abstracts that focus on "Skills Building". For additional info on the Conference themes/abstract details check the website NMAC.org

Contact: NMAC.org

The National Minority AIDS Council (NMAC), a 501(c)3 organization, develops leadership in communities of color to end the HIV/AIDS epidemic since 1987. NMAC also serves as an association of AIDS service organizations providing valuable information to community based organizations, hospitals, clinics and other groups assisting individuals and families affected by the AIDS epidemic. Their next conference is going to be in October 2014. For those who are not able to attend the conference, the proceedings will be aired at the California Endowment Center. The deadline for submitting abstracts is April 4, 2014

Date Posted: 01/15/2014

**F**

**Food Bank - Free Food, Free Personal Care Items, Free Nutritional Counseling, Treatment and Advocacy**

Cost: No Cost

Contact: Vance North Necessities of Life Program Food Pantries (213) 201-1433 or (213) 201-1586 Fax (213) 201-1464

Necessities of Life Program Food Pantries (NOLP) provide free groceries (eggs, cheese, yogurt, milk, fresh fruits and vegetables, frozen meats, canned and dry goods), personal care and cleaning items, and nutrition counseling to eligible individuals living with HIV / AIDS who live in Los Angeles County, and whose income is under \$1,395 per month. The Long Beach food pantry is located at 411 East 10th Street, Long Beach, CA 90813. NOLP also has other locations throughout Los Angeles County. Please call us at (213) 201-1433 or (213) 201-1586 if you need more information.

Date Posted: 01/15/2014

**R**

**Research Participation and Opportunities for Pregnant Women**

Cost: No Cost - Qualified study participants will actually get financial compensation for their participation \$25 for the 1<sup>st</sup> session and \$40 for the 2<sup>nd</sup> session.

Contact: (562) 495-2330 / 109 Atlantic Avenue LB CA 90813

This research study would like to assess experimental rapid laboratory tests for HIV, syphilis, hepatitis B and hepatitis C. They are looking for pregnant women only.

Date Posted: 01/15/2014

**S**

**Statistics (HIV Related)**

Cost: No Cost

Contact: Provided by Sonali Kulkarni MD MPH and Sophia Rumanes MPH, County of Los Angeles, Department of Public Health Division of HIV & STD Programs

In a presentation for the Long Beach HIV Planning Group, Drs Kulkarni & Rumanes presented updated HIV data for the Long Beach and SPA 8 area and described innovative approaches to HIV and STD testing being implemented in LA County. The slide set for this presentation is attached.

Date Posted: 01/15/2014

**Support Group – Mentors and Buddies of the Long Beach Dept of Health & Human Services**

Cost: No Cost - Free every 2<sup>nd</sup> and 4<sup>th</sup> Monday of the month between 6-7 PM. First meeting on Monday January 27, 2014 starts at 6:00 p.m.)

Contact: Julio Rodriguez at (562) 570-4213 / julio.rodriguez@longbeach.gov

A safe environment to receive information, guidance, respect and non-judgmental support. Meet others and share stories of survival and resilience. Open to all, regardless of HIV status, age or gender. Light meals & refreshments will be provided. Hablamos espanol.

Date Posted: 01/15/2014

**T**

**Transgender Services and Counseling (Transgeneros Unidas)**

Cost: No Cost

Website: [www.Bienestart.org](http://www.Bienestart.org)

Contact: Victor Martínez, Director of Prevention Programs at (323) 727-7896 ext. 107 or at [vmartinez@bienestar.org](mailto:vmartinez@bienestar.org) or Daniela Escobedo at T 562-438-5800 5200 F 562-438-5200 Long Beach Center 1464 Cherry Ave LB CA 90013

The Transgéneros Unidas Program (TU) was established in 1996 to provide services to the Latina Transgender community. The TU program is one of a kind program that caters specifically to the needs of Latina immigrant transgender women. The TU program offers weekly support group gatherings, education intervention programs, educational forums and social events such as Miss BIENESTAR. The TU program also focuses on empowering transgender women to be agents of change in their communities so that they can make educated decisions and lead healthier lives.

**Transgender Services and Counseling (Comprehensive Risk Counseling Services)**

Cost: No Cost

Contact: contact: Robert Gomez Director of Comprehensive Risk Counseling Services T.323-752-3100 F.323-752-3420 Email. [Rgomez@bienestar.org](mailto:Rgomez@bienestar.org) Daniela Escobedo T. 562-438-5800 F.562-438-5200 Email [descobedo@bienestar.org](mailto:descobedo@bienestar.org) 1464 Cherry Ave. Long Beach, CA 90813

Website: [www.Bienestart.org](http://www.Bienestart.org)

Contact: Victor Martínez, Director of Prevention Programs at (323) 727-7896 ext. 107 or at [vmartinez@bienestar.org](mailto:vmartinez@bienestar.org) or Daniela Escobedo at T 562-438-5800 5200 F 562-438-5200 Long Beach Center 1464 Cherry Ave LB CA 90013

Please email if you want to unsubscribe.

Next Long Beach Planning Group Meeting: April 09, 2014

Best,  
Mauro

# New Year, New Directions in HIV Partnership with Long Beach

Long Beach HIV Planning Body  
January 8, 2014

County of Los Angeles  
Department of Public Health  
Division of HIV and STD Programs

Sophia F. Rumanes, MPH  
Chief, Prevention Services

Sonali P. Kulkarni, MD, MPH  
HIV Medical Director



# Agenda

- LAC and Long Beach HIV and STD Epidemiology
- Innovations in HIV Testing
- Innovations in TLC+ Programming



	Long Beach	Los Angeles County
Land Area	50 sq mi (1.3%)	4,060 sq mi
Population	461,564 (4.7%)	9,962,789
Reported HIV/AIDS Cases	7,800 (17.1%)	45,500
Estimated living HIV/AIDS Cases	9,920* (17.1%)	58,000

**Los Angeles County**

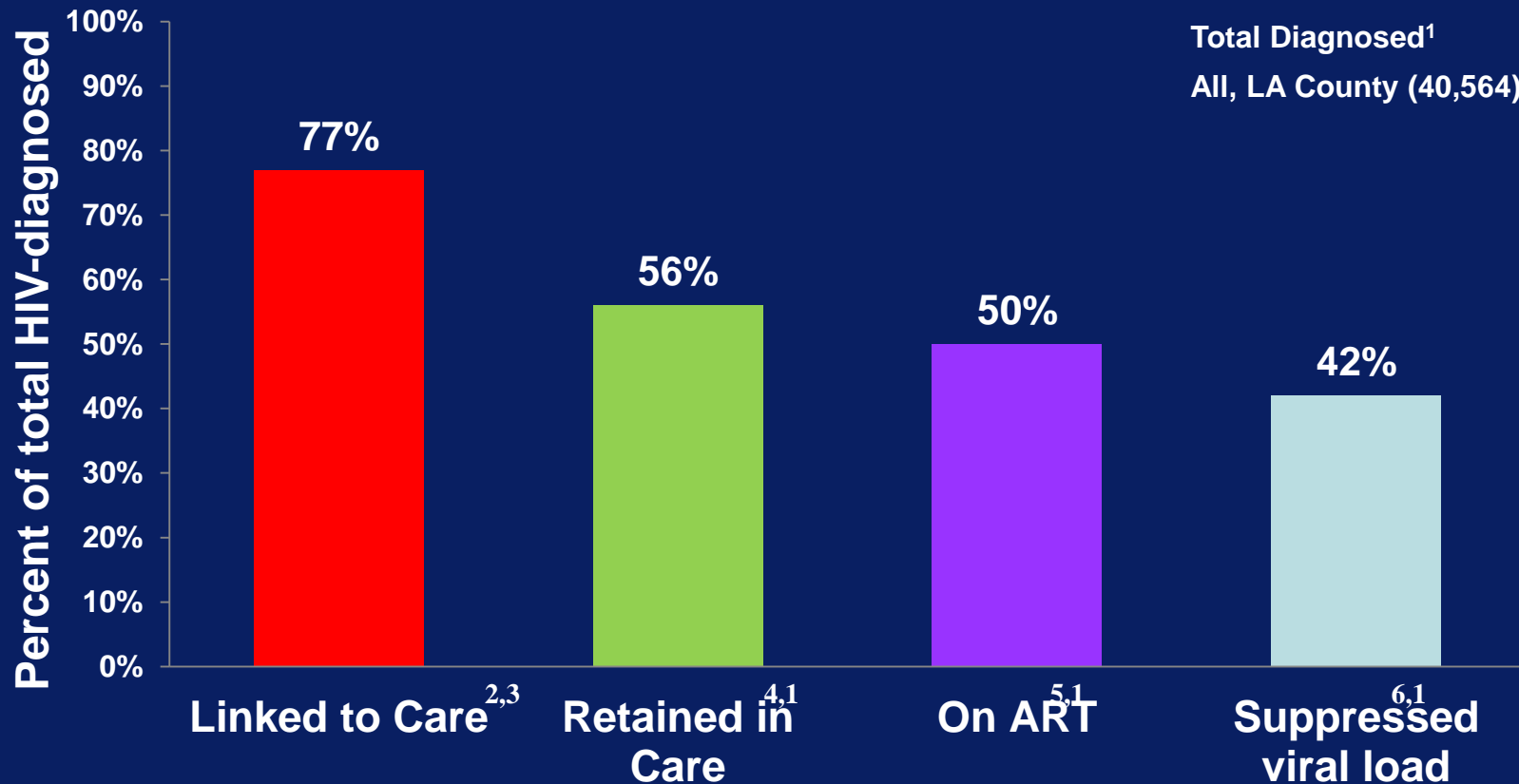
**Long Beach**

Data Source: Los Angeles County  
Department of Public Health, HIV  
Surveillance, 2013, U.S. Census , 2010

\*9,212 calculated assuming 18.1% of  
HIV positive Californians are unaware  
of their status, plus estimated 342  
pending cases



# Percent of HIV-Diagnosed Persons in LAC in Stages of the HIV Care Continuum, 2009



<sup>1</sup> Denominator is # diagnosed w HIV through '08 & living at end of '09 from LAC surveillance data

<sup>2</sup> Percent of persons diagnosed with HIV in 2009 w  $\geq 1$  CD4 or VL test within 3 months of diagnosis from LAC surveillance data

<sup>3</sup> Denominator is # diagnosed w HIV in 2009 from LAC surveillance data

<sup>4</sup> Percent of persons w  $\geq 2$  CD4/VL tests at least 3 months apart in 2009 from LAC surveillance data

<sup>5</sup> Numerator is estimated weighted % on ART from the MMP January-April '09

<sup>6</sup> Numerator is estimated weighted % on ART w vl <200 copies/ml from MMP January-April '09

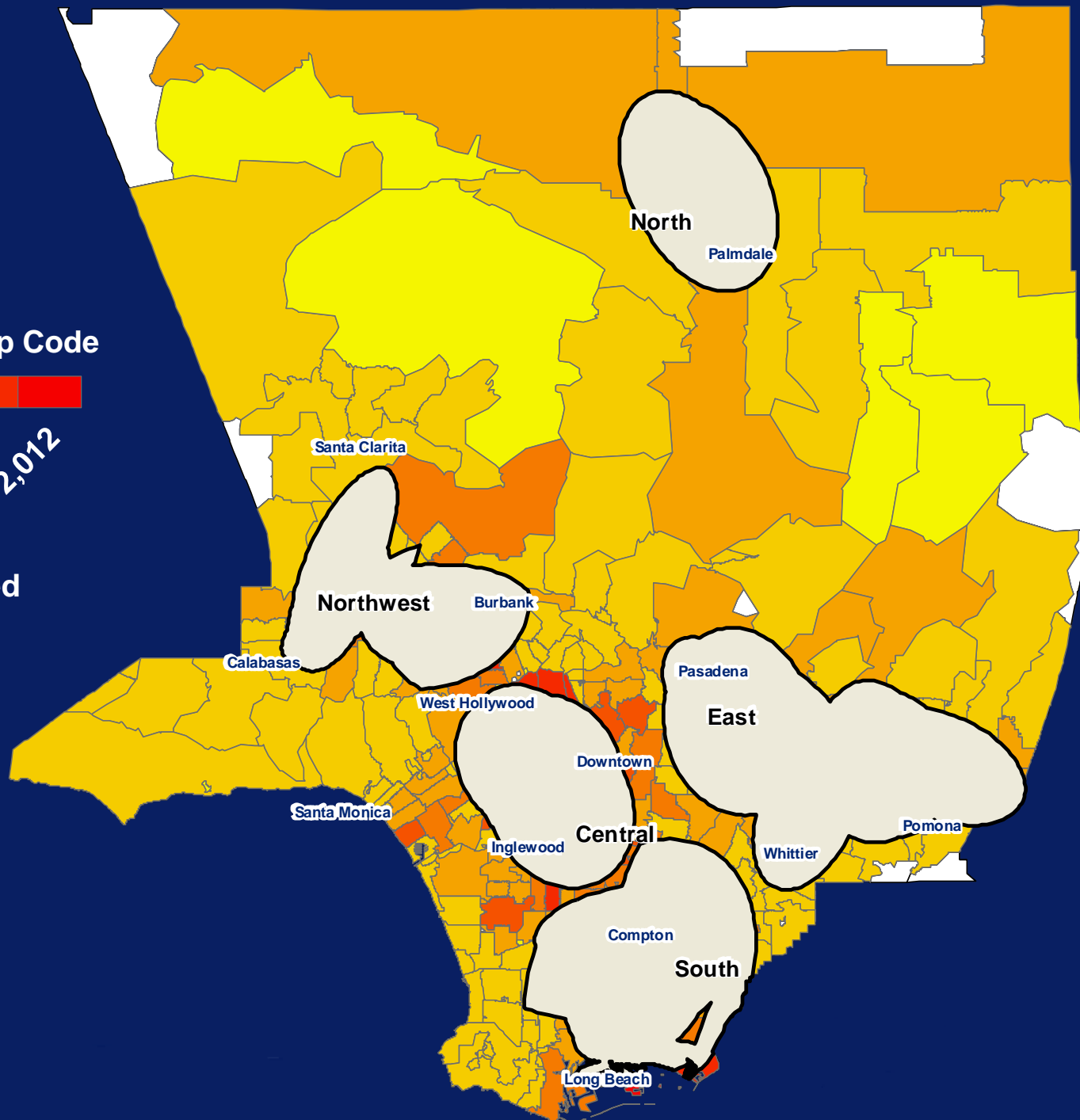


# PLWHA by Residence Zip Code



<5  
6 - 74  
75 - 163  
164 - 259  
260 - 404  
405 - 911  
912 - 2,012

 No PLWHA Reported



Data Source: eHARS as of September 30, 2011



COUNTY OF LOS ANGELES  
**Public Health**



# HIV Prevalence by Zip Code, City of Long Beach, 2012

## Legend

### HIV Program Type

- ✚ Events
- Integrated Screening
- Mobile
- ◆ Public STD Clinic
- ✕ Storefront
- ◆ City of Long Beach DHS

### HIV Cases



6 - 51  
52 - 150  
151 - 339  
340 - 634  
635 - 1305

≤5 Cases

Interstate

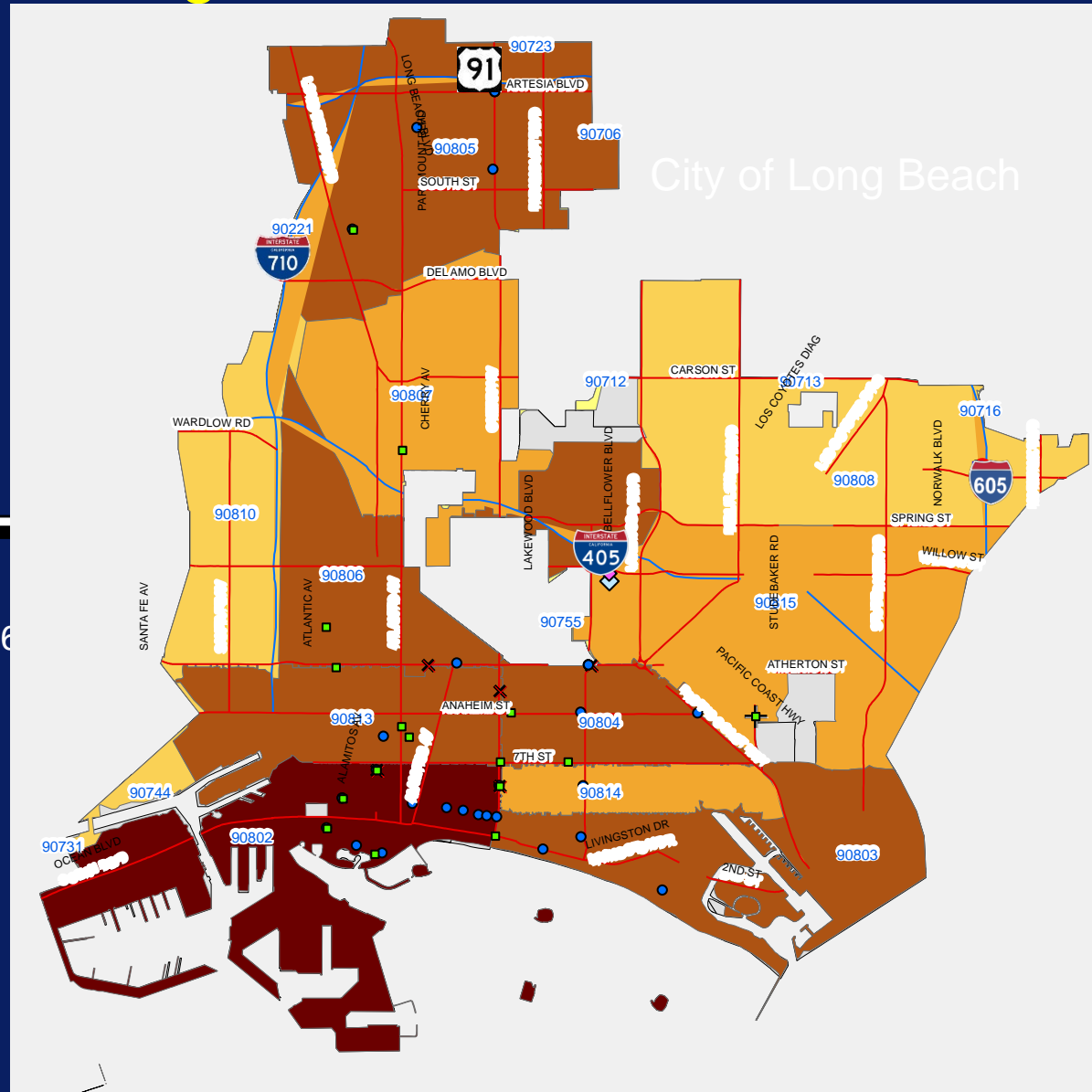
Other

U. S.

Major Streets

0 1  
Miles

1:86,436



COUNTY OF LOS ANGELES  
Public Health

# New HIV Cases by Zip Code, City of Long Beach, CY 2012

## Legend

### HIV Program Type

- ✚ Events
- Integrated Screening
- Mobile
- ◆ Public STD Clinic
- ✕ Storefront
- ◆ City of Long Beach DHS

### HIV Cases



6-9  
10-13  
14-20  
21-32  
33-46

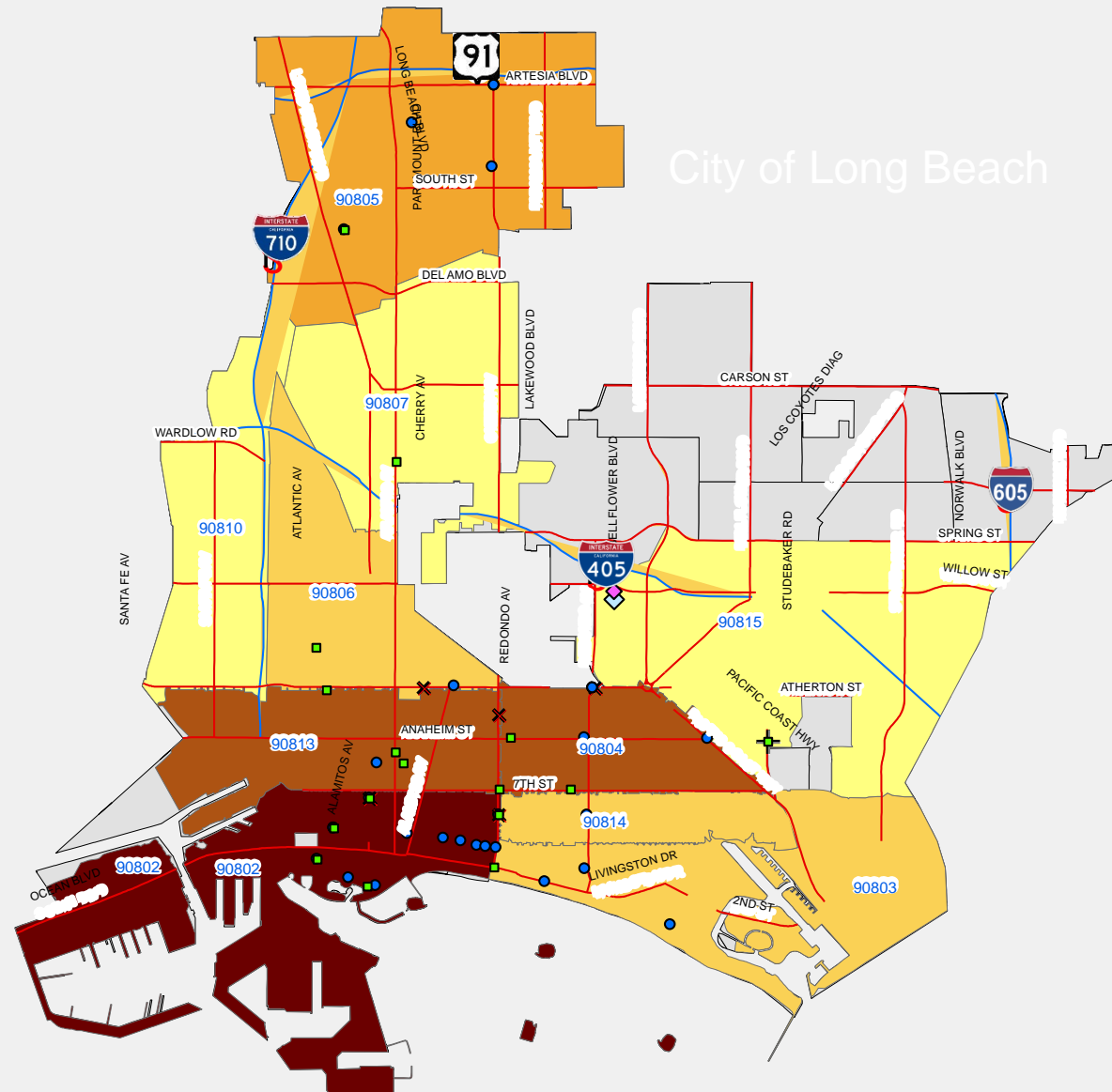
≤5 Cases

Interstate

Other

U. S.

Major Streets



COUNTY OF LOS ANGELES  
**Public Health**

# New HIV Cases by Census Tract, City of Long Beach, CY 2012

## Legend

### HIV Program Type

- ✚ Events
- Integrated Screening
- Mobile
- ◆ Public STD Clinic
- ✕ Storefront
- ◆ City of Long Beach DHS

### HIV Cases



0 1 8 9

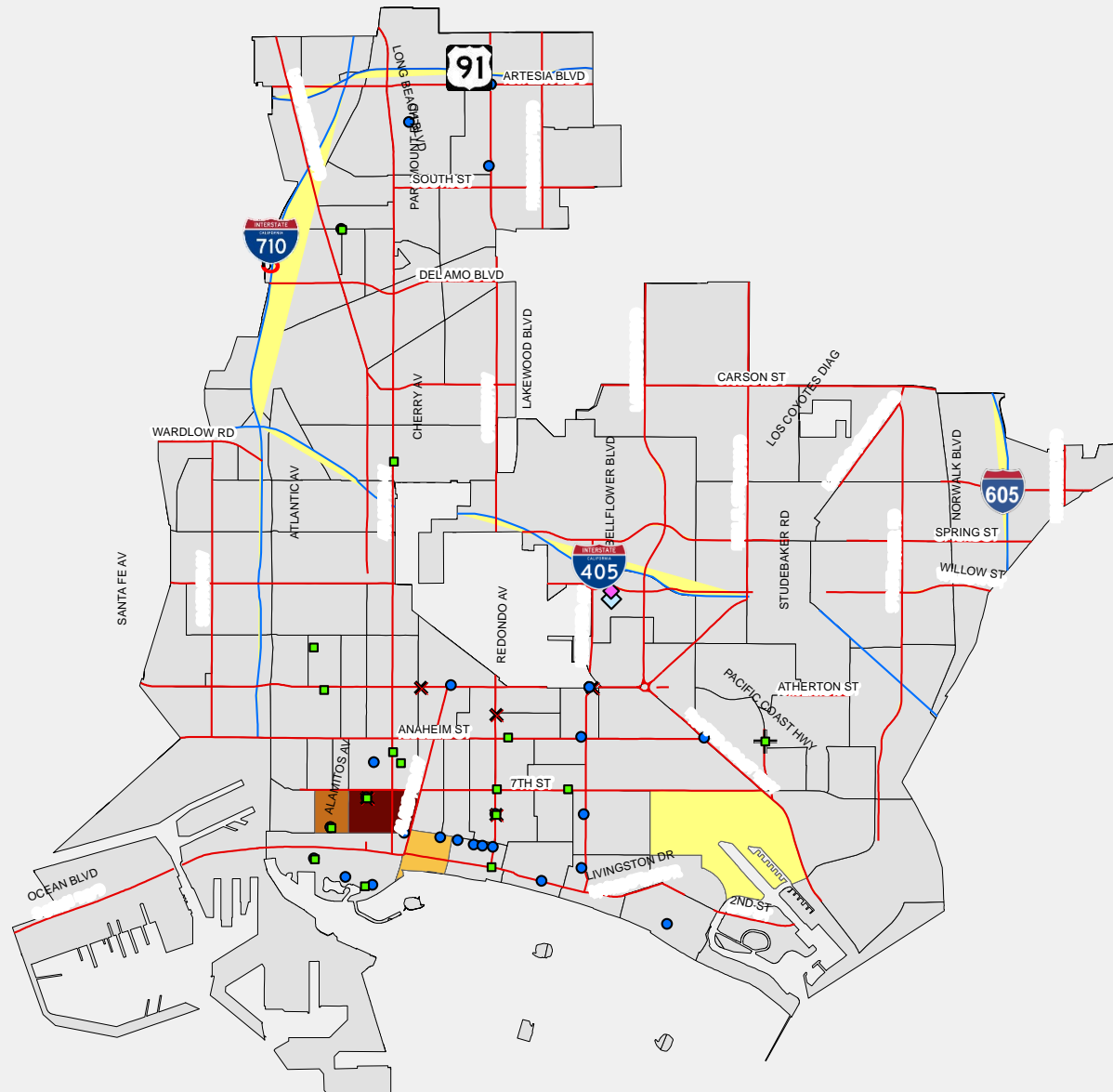
≤5 Cases

Interstate

Other

U. S.

Major Streets



COUNTY OF LOS ANGELES  
Public Health

# New HIV Cases by Census Tract, City of Long Beach, CY 2012

## Legend

### HIV Program Type

- ✚ Events
- Integrated Screening
- Mobile
- ◆ Public STD Clinic
- ✕ Storefront
- ◆ City of Long Beach DHS

### HIV Cases



0 1 8 9

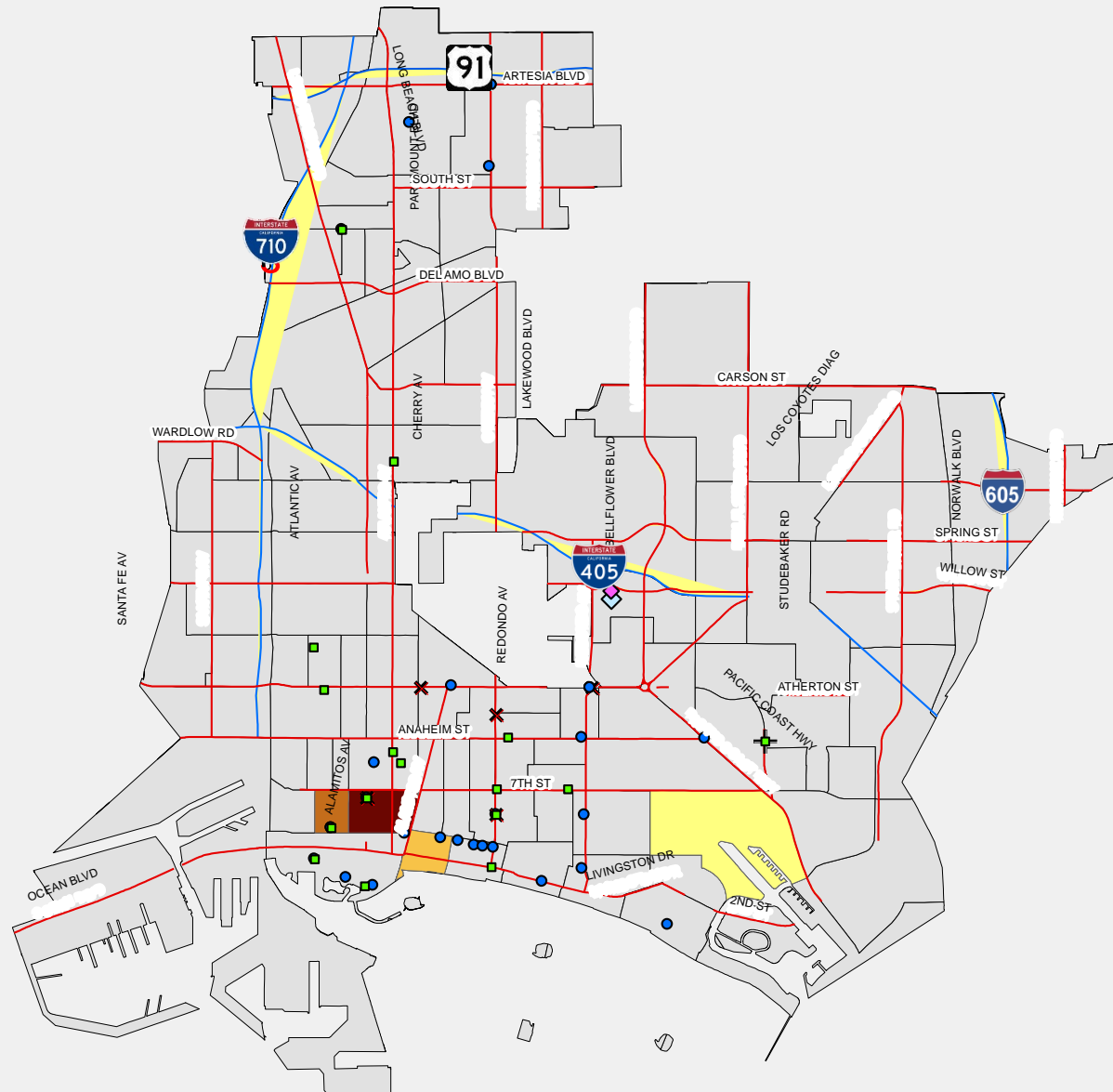
≤5 Cases

Interstate

Other

U. S.

Major Streets



COUNTY OF LOS ANGELES  
**Public Health**

# HIV Testing Services Model



# Context for New Directions



- National HIV/AIDS Strategy
- Enhanced Comprehensive HIV Prevention Planning for Metropolitan Statistical Areas Most Affected by HIV/AIDS (ECHPP)
- Program Collaboration/Service Integration (PCSI)
- Testing, Linkage to Care Plus (TLC+)



# NHAS Influenced HIV Testing Goals

- 110,000 tests in 2011/2012
- 1.03% new HIV positivity rate
- 85% Linkage to care
- 85% Disclosure for all testers
- 95% Disclosure for all positive testers
- 100% Referral to Partner Services



We wanted to modernize our HIV testing program to make it more effective and easier for people to test, link into care, and receive appropriate referrals while providing high quality services that meet our goals.

AND

Make it easier and more cost effective for our PARTNERS to provide HIV testing services.

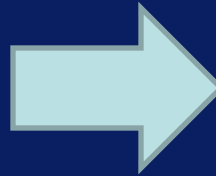




# Prior System

- Focused on counseling
- Multiple assessments and forms, forms, forms
- Onerous administrative processes and data systems- HIRS, LEO, ...
- Majority fee for service only
- Testing algorithm = Rapid Test + WB
- Testing performance not aligned with National HIV/AIDS strategy
- Outdated testing model! Needed innovation!





# Refining LAC's HIV Testing Services Model

- Needed to decrease barriers to testing
- Use data/evidence to guide programs
- Set new performance measures
  - Pay for Performance
- New HIV Testing model & amend Contracts
- New data system
- Focus on Linkage to Care and Partner Services
  - Rapid Testing Algorithm
  - Increase referral to partner services



# How did we get there? - The Process



# How did we get there? - The Process (cont'd)

- Analyzed HIV testing and linkage to care data
- Created an internal multi-disciplinary DHSP HIV Testing Streamline Work Group
  - Synthesized qualitative and quantitative data.
  - Ensured expertise from prevention, care, research and evaluation, training, surveillance, policy, contracting, finance, and quality management was represented on the group.
  - Operationalized implementation plan and timeline
  - Guided the process through implementation.



# How did we get there? - The Process

- Review and Considered:
  - Minutes from Quarterly HIV Testing Coordinator meetings
  - One-on-one HIV Testing Program meetings/TA sessions
  - NHAS, CDC, & ECHPP discussions
  - Urban Coalition for HIV/AIDS Prevention Services (UCHAPS) discussions
- Reviewed local community planning group recommendations for HIV testing services



# How did we get there? - The Process

- Received Technical Assistance UCHAPS jurisdictions – Washington D.C., Houston, and San Francisco
- Communicated intent with local, state, and federal partners.
- Local agencies supported State legislation that supported TLC+ activities.





# How did we get there? - The Process

- Focused on Testing in Non-Healthcare Settings (i.e. targeted testing sites)
- Anchored New Directions in TLC+ and NHAS Principles
- Planning group and provider feedback on the system provided valuable information





# What Changed?

- Data system
  - Developed/purchased a new flexible and nimble scan-able data collection system
  - Decreased data collection process and forms
  -  No separate HIV case reporting
  -  No forms for 45% of data (electronic reporting)
- Performance measures
- Testing Process & can use tests other than Oraquick.
  - Implemented new rapid testing algorithm
  - INSTI, ClearView
- Matched testing data with HIV Surveillance to determine real linkage to care rate and new positives.



# What Changed? (cont'd)

- Training
  - New counselor training with fingerstick cert
  - Quarterly provider meetings
- Stronger evaluation and data feedback loop with agencies
- Contracts
- Restructured reimbursement mechanism
  - Fee- for- Service and Cost Reimbursement payment mechanism- “Pay-for-Performance” Structure
  - 2 budgets for each program
    - Base Budget
    - Pay for Performance (PFP) Budget
  - Incentivized performance
  - Enforced performance measures via payment structure

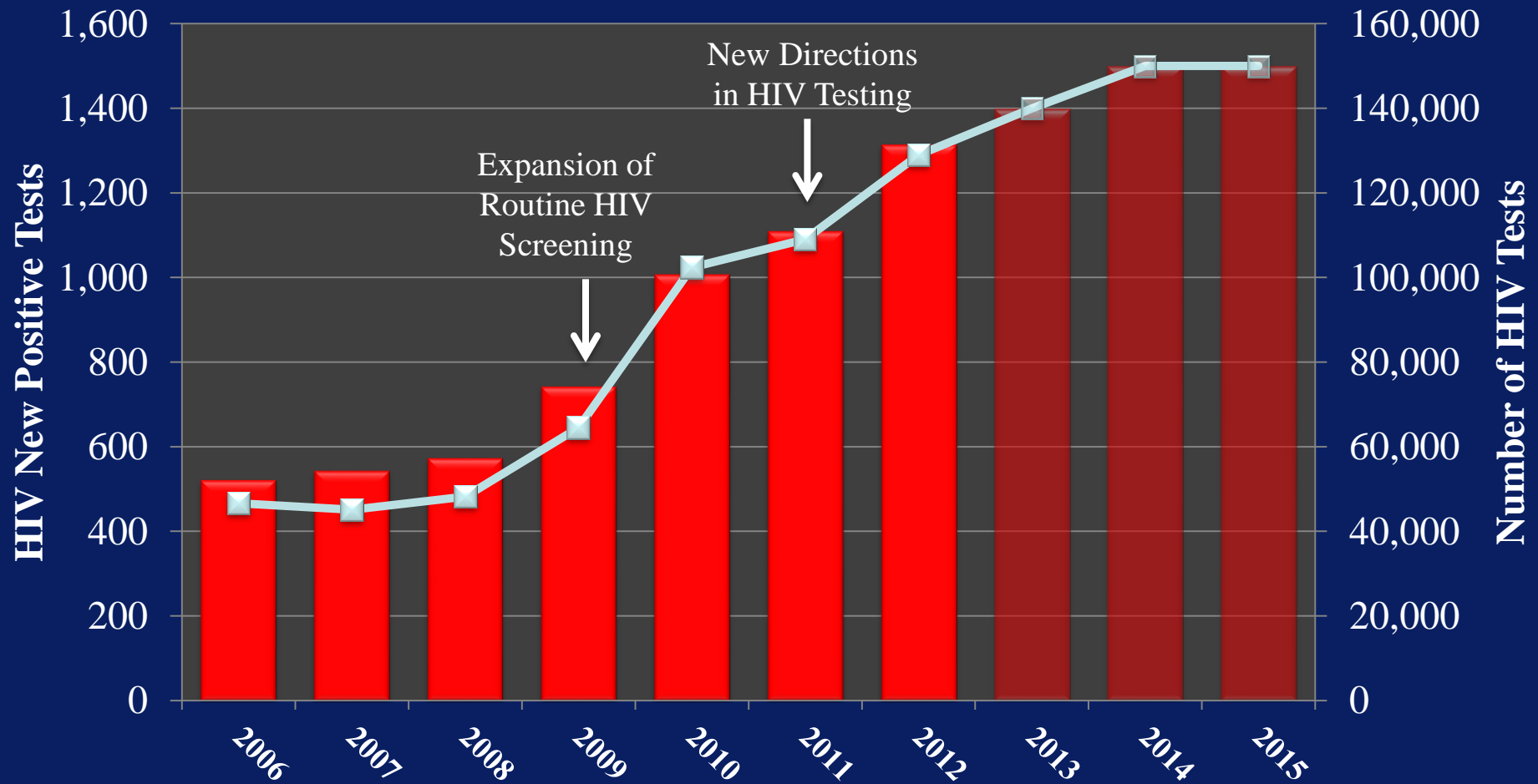


# Two years after “New Directions” implementation....



# Division of HIV and STD Programs

## HIV Tests and New Positive Tests By Year\*

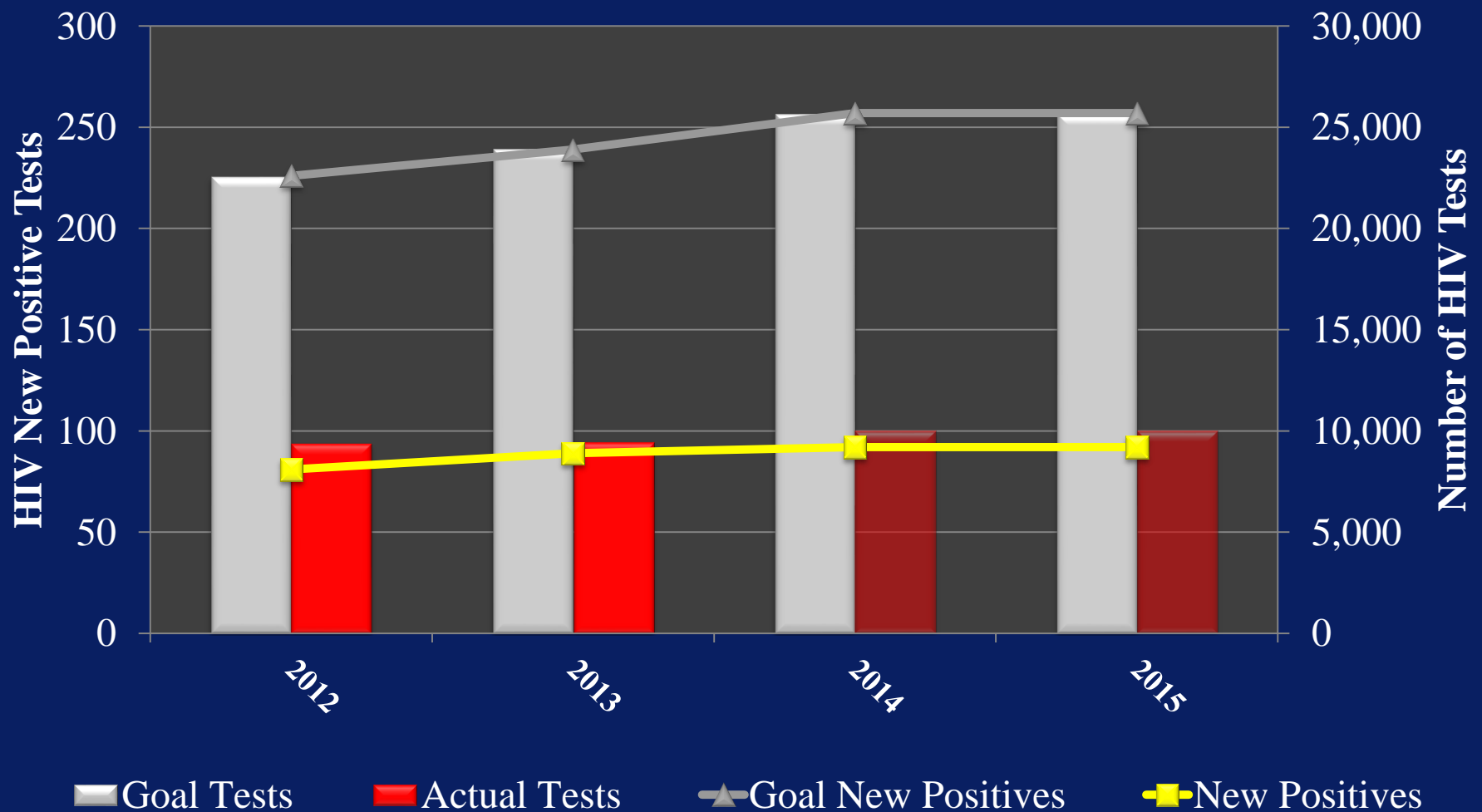


\*Includes all HIV testing supported by Public Health, HIV and STD Programs with projected numbers based on internal goals (2013-15)

■ HIV Tests ■ New Positives



# HIV Tests and New Positives Conducted within the City of Long Beach\* Compared to DHSP Goals\*\*, 2012-2015



\*Includes all HIV testing supported by DHSP and the City of Long Beach

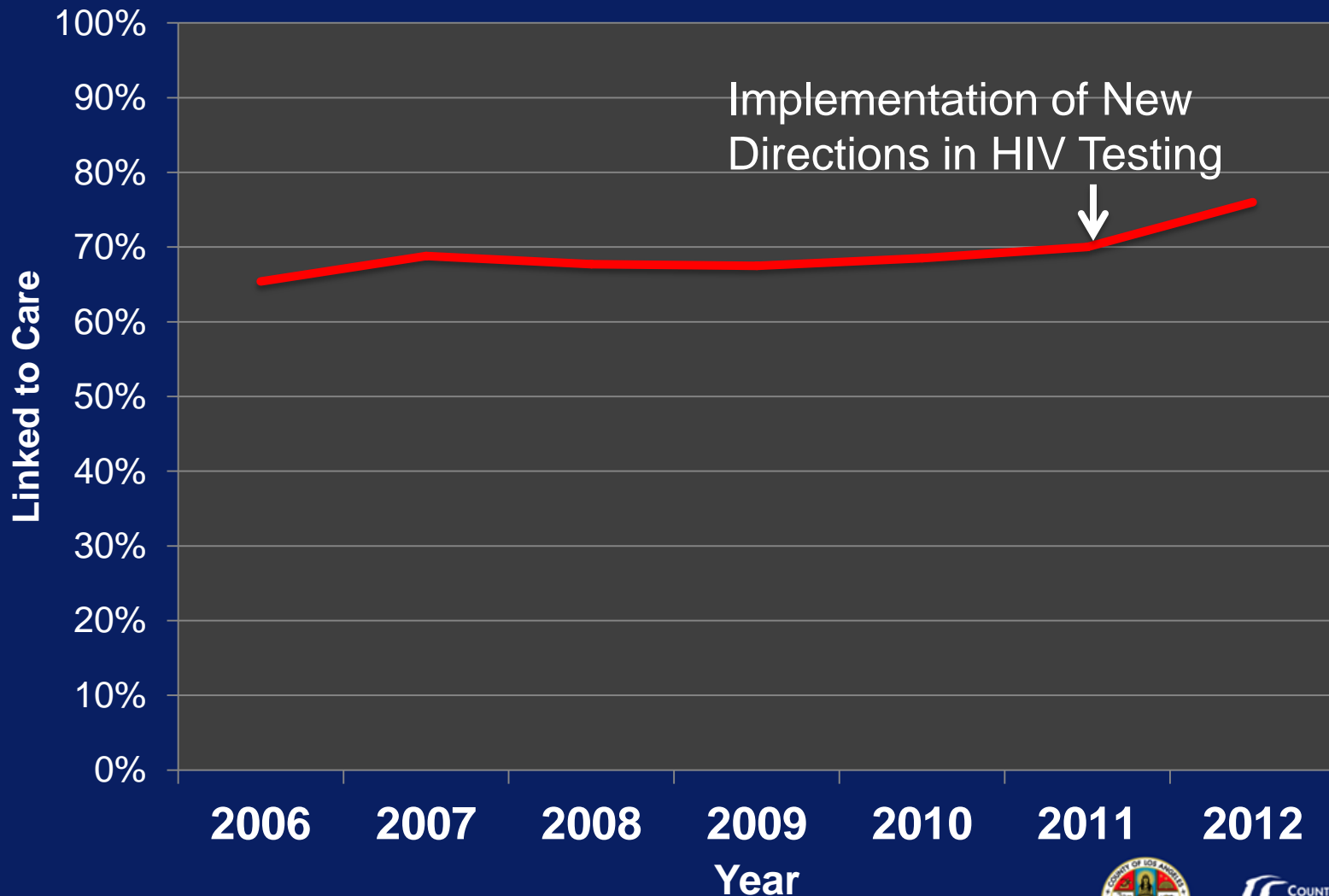
\*\*Goals calculated to achieve NHAS Strategy of reducing unaware of HIV status from 21% to 10% by 2015; Data Source: Division of HIV and STD Programs, HIV Testing Services, 2013; CDC EvalWeb, 2013



# HIV Testing Services by Modality, 2012

HTS as of 11/19/13	Tests	Positive	%	New Positive	%
<b>Routine Screening</b>	<b>41,436</b>	<b>450</b>	<b>1.09%</b>	<b>344</b>	<b>0.83%</b>
Community Clinic	3,705	10	0.27%	10	0.27%
Community STD Clinic	7,806	242	3.10%	161	2.06%
Emergency Department	7,252	49	0.68%	41	0.57%
Urgent Care	420	4	0.95%	4	0.95%
Public Health STD Clinic	21,371	144	0.67%	127	0.59%
Events	882	1	0.11%	1	0.11%
<b>Targeted Testing</b>	<b>81,211</b>	<b>1,011</b>	<b>1.24%</b>	<b>897</b>	<b>1.10%</b>
Storefront	45,917	620	1.35%	537	1.17%
Mobile	26,063	239	0.92%	222	0.85%
Social Network	1,178	56	4.75%	55	4.67%
Integrated Screening	4,404	43	0.98%	34	0.77%
Bathhouses/Sex Clubs	2,322	46	1.98%	42	1.81%
PEP	1,327	7	0.53%	7	0.53%
<b>Jails</b>	<b>8,323</b>	<b>33</b>	<b>0.40%</b>	<b>25</b>	<b>0.30%</b>
<b>Court-ordered</b>	<b>606</b>	<b>14</b>	<b>2.31%</b>	<b>5</b>	<b>0.83%</b>
<b>Drug Treatment</b>	<b>323</b>	<b>1</b>	<b>0.31%</b>	<b>0</b>	<b>0.00%</b>
<b>Total</b>	<b>131,899</b>	<b>1,509</b>	<b>1.14%</b>	<b>1,271</b>	<b>0.96%</b>

# Linkage to HIV Care Among DHSP-supported HIV Testing Providers (2006-11)



# Pre and Post New Directions Results by Performance Measure

Measure	Average Quarter Prior to New Directions	Average Quarter Post New Directions	% Change
Testing Volume	11,433	16,422	+43.6%
Positive Tests	138	198	+43.7%
New Positive Tests	117	191	+63.2%
New Positive %	1.03%	1.10%	+.07%
Linked to Care	96	143	+48.8%
Linked to Care %	73.1%	75.5%	+2.4%





# New Directions Agency Reactions

- Pleased with overall increased performance of HIV Testing Program
- Increased use of data to improve services and program
- Many agencies hired more staff
- Able to identify high performers
- Concerns with payment structure
  - Challenging to develop budgets for “Pay for Performance”
  - Agencies not meeting measures challenged



# New Directions Agency Reactions

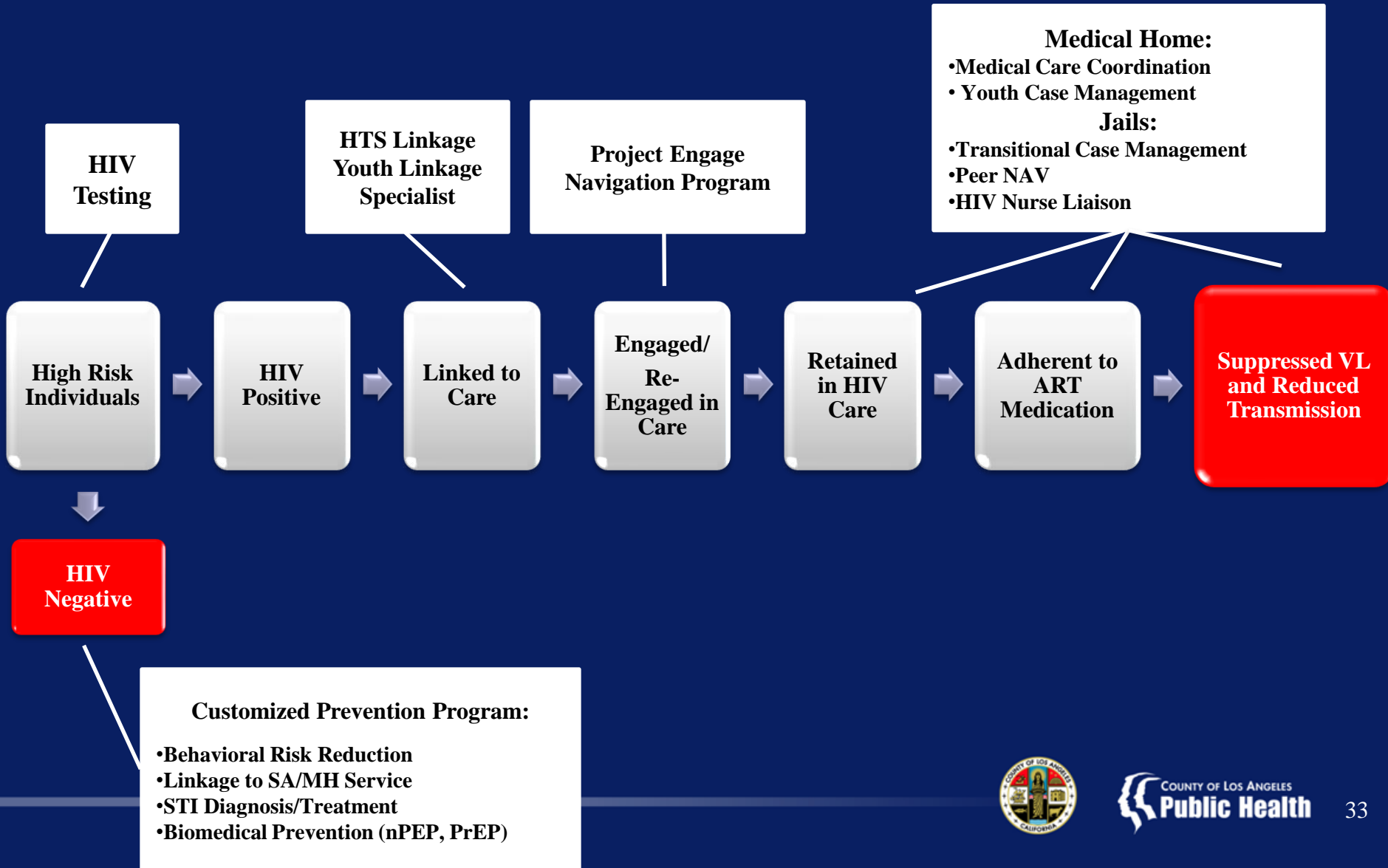
- Exposed linkage to care challenges and barriers
- Suggested tiered performance measures
- High performers able to justify increases in funding requests
- Appreciation of data feedback loop to providers
- Positive feedback re: scan-able data system!
- Electronic reporting appreciated!
- Some pushed back on performance measures; esp. LTC and HIV PosRate



# Innovations in TLC+



# Los Angeles County TLC+ Framework



# Project Engage



# Project Engage

## ■ Background:

- Goal is to identify out-of-care(OOC) HIV+ persons and link them to HIV care
- OOC HIV+ persons (alters) are identified through social network referrals from seeds or direct recruitment by staff; alters may recruit OOC
- Incentives: \$40 for baseline survey for seeds/alters, additional \$40 for seed when alter links to care
- Seeds identified from:
  1. HE/RR programs at CBOs for at-risk MSM (eg crystal meth support group)
  2. HIV clinic patient populations
  3. Flyer/pocket card recruitment

## ■ Current status:

- Ongoing Enrollment





Flyer



Pocket Card



**COMPLETE THE SURVEY TODAY!**  
The LA County Department of Public Health is conducting a project to help find HIV-positive people who are out of HIV care and help get them into care.

If YOU are HIV-positive and out of care, or YOU KNOW people who are HIV-positive and out of care and are interested in taking part in this project, please contact **323-236-5363**

Those who complete a survey and help get people into care will be reimbursed for each person they help recruit.

---

# PROJECT ENGAGE

**Are you HIV+ and out of care?  
Do you know HIV+ people who  
are out of care?**

Receive compensation for participating in Project Engage

# PROJECT ENGAGE

**Are you HIV+ and out of care?  
Do you know HIV+ people who  
are out of care?**

**Receive compensation for  
participating in Project Engage**

The LA County Department of Public Health is conducting a project to help find HIV-positive people who are out of HIV care and help get them into care.

If YOU are HIV-positive and out of care, or YOU KNOW people who are HIV-positive and out of care and are interested in taking part in this project, please call or text **323-236-5363**

Those who complete a survey and help get people into care will be reimbursed for each person they help recruit.

**LEARN MORE ABOUT THE PROGRAM TODAY!**

PROJECT ENGAGE  
323.236.5363

PROJECT ENGAGE  
323.236.5363

PROJECT ENGAGE  
323.236.5363

PROJECT ENGAGE  
323.236.5363

PROJECT ENGAGE  
323.236.5363

PROJECT ENGAGE  
323.236.5363

## ■ **Preliminary Lessons Learned:**

- Agency-based recruitment more effective than clinic-based recruitment
- A few productive seeds is critical to success
- Labor intensive for PE staff to get OOC alters to HIV care
- Capacity needed to help OOC alters obtain photo ID to enroll in medical care/ADAP
- LTC intervention needed for some

## ■ **Next Steps:**

- Scale up staff (currently 1 field staff)
- Explore effectiveness of direct field recruitment techniques at parks/street corners, enhanced recruitment at more CBOs, at-risk youth agency, mobile testing vans, skid row clinic
- Add LTC intervention (ARTAS) in next phase
- Recruit effective social network testing seeds as PE seeds





# Navigation Program



# Navigation Program

## ■ Background:

- Goal is to re-engage lost HIV clinic patients in HIV care using enhanced locator techniques and modified strengths-based case management intervention (ARTAS)
- Participants to date are OOC patients from 4 LAC HIV clinics
- Eligibility includes HIV+ patients who have not had a primary care visit in the past 6 months and last viral load >200 copies/ml; or no HIV primary care visits in 12 months; or newly-diagnosed and never in care

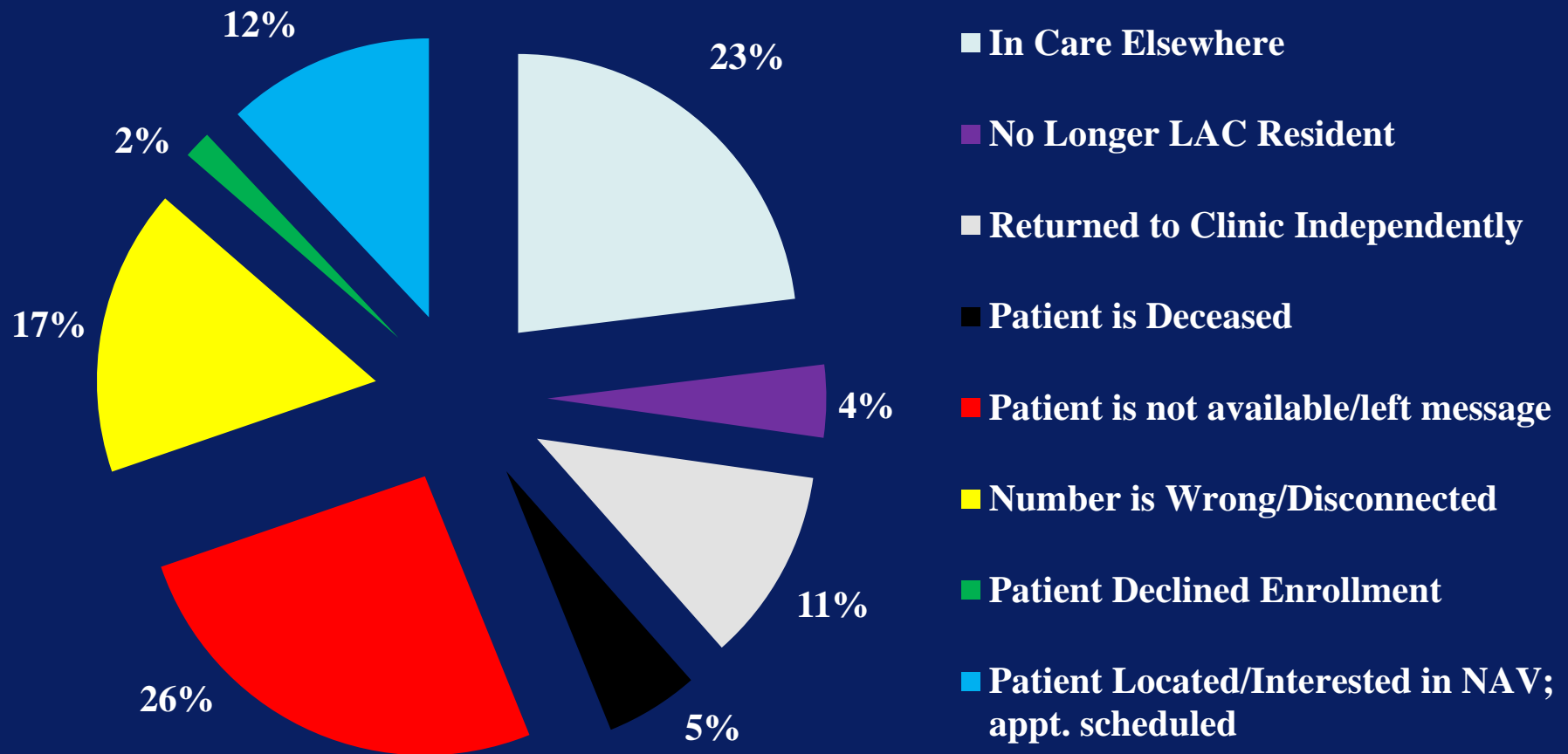
## ■ Current status:

- Ongoing enrollment



# Preliminary Data

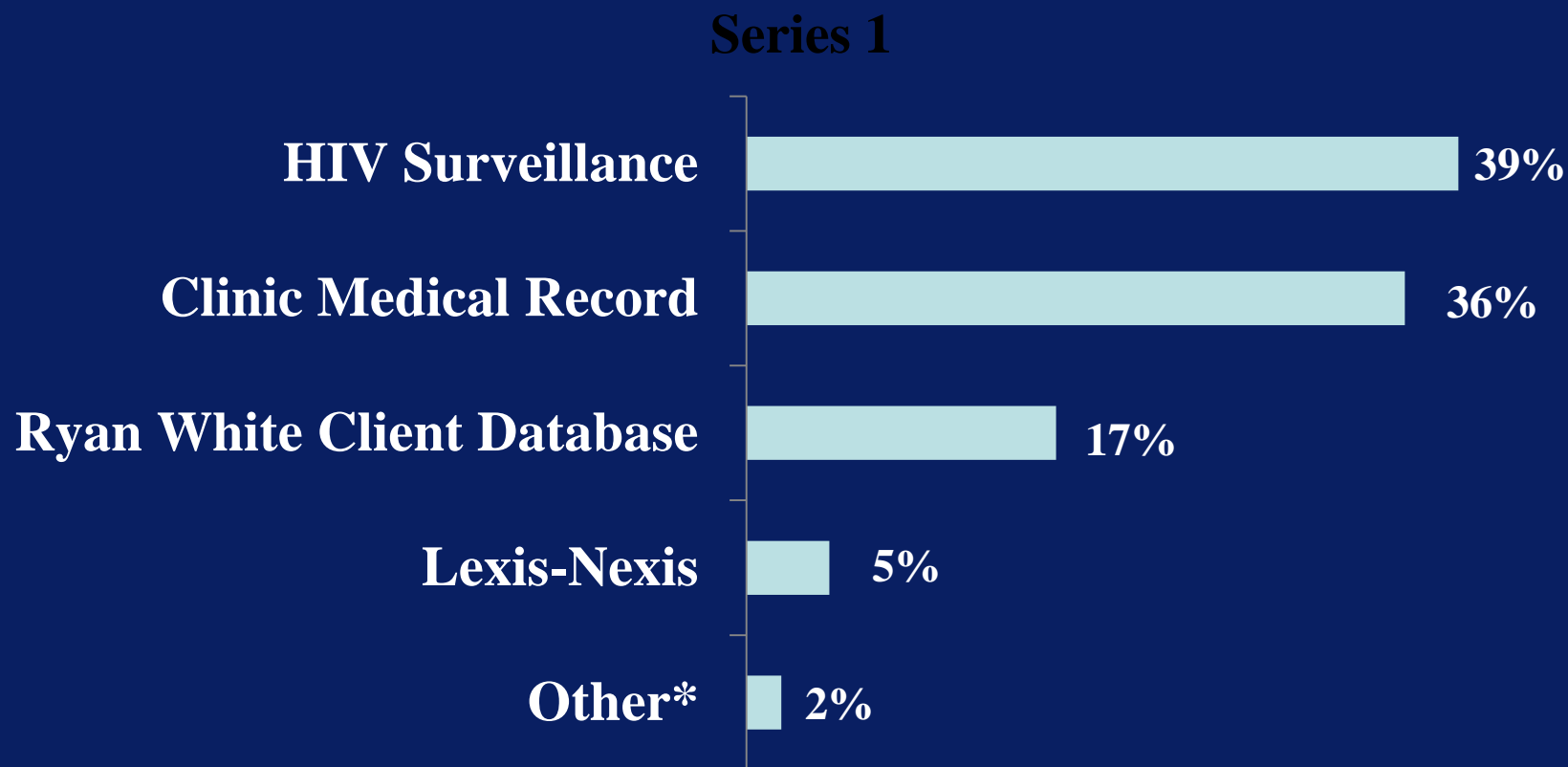
- Disposition of 499/636\* Lost Clinic Patients



\*137 lost clinic patients were found ineligible due to VL/last appointment date



# Most Effective Data Source for Contact Information (n=499)



\*Includes LAC Inmate locator, CA Prison Locator, STD Casewatch



# Lessons Learned and Next Steps

- **Preliminary Lessons Learned**
  - Labor-intensive to locate patients
  - Once locating patients, relatively easy to link to care
  - HIV surveillance and clinic data provided most useful contact information for finding OOC patients
  - Home visits less productive than anticipated
  - Structural roadblocks
    - LACDPH legal concerns with sharing surveillance information
    - Clinic administrative requirements
- **Next Steps**
  - Incorporate lessons learned into county-based LTC program



# Next Steps

- Integrate STD testing and treatment
- Continue partnership with LB stakeholders
- Expand, expand, expand services in highly impacted areas such as Long Beach...
- Continue to use data to inform services
- Improve and expand Partner Services
- Improve linkage to care services



# Acknowledgments

- Mike Janson, Chief of Research and Evaluation, DHSP
- Amy Wohl, Chief Epidemiologist, DHSP



# Questions?

Sonali Kulkarni

[skulkarni@ph.lacounty.gov](mailto:skulkarni@ph.lacounty.gov)

Sophia Rumanes

[srumanes@ph.lacounty.gov](mailto:srumanes@ph.lacounty.gov)

213-351-8000

